
SENATE CONCURRENT RESOLUTION

URGING THE REESTABLISHMENT OF THE WORKING GROUP TO EXAMINE
SOCIAL DETERMINANTS OF HEALTH AND RISK ADJUSTMENT FOR
MEDICAID, GAP-GROUP, AND UNINSURED INDIVIDUALS.

1 WHEREAS, a person's health is affected by social
2 determinants of health, which have considerable bearing on the
3 health of all individuals and the population in general, even
4 more so than a person's genetic disposition and the traditional
5 medical care they receive; and
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7 WHEREAS, the "County Health Rankings & Roadmaps" report has
8 found that much of life expectancy and health status is
9 attributed to social and economic factors (forty percent),
10 health behaviors (thirty percent), and the physical environment
11 (ten percent), leaving only twenty percent to clinical care; and
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13 WHEREAS, many individuals are subject to multiple
14 determinants, or risks, such as homelessness, language barriers,
15 abuse, unemployment, poverty, and lack of transportation at any
16 given time; and
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18 WHEREAS, social determinants of health complicate the
19 ability to address individual and community health concerns and
20 pose challenges to patients and providers in identifying,
21 assessing, and treating health problems; and
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23 WHEREAS, enabling services, which are non-clinical services
24 designed to address gaps in care by qualified staff from the
25 community who build relationships and trust with patients, can
26 reduce social determinants of health barriers and address issues
27 such as housing, transportation, interpretation, economic
28 security, and linkage and coordination with providers of other
29 services, such as education, behavioral health, and employment
30 services; and
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1 WHEREAS, unmet needs for social determinants of health and
2 other enabling services, including care coordination, often
3 result in costlier, preventable health care costs such as
4 hospitalizations and emergency-room utilization; and
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6 WHEREAS, traditional health care and payment for health
7 care do not address social determinants of health related to
8 language, culture, economic and livelihood security,
9 environmental quality, transportation, and many other barriers
10 individuals face to utilize health care services; and
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12 WHEREAS, health care costs could be reduced with improved
13 access to primary care services and risk adjustment for social
14 determinants of health and other enabling services; and
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16 WHEREAS, the Medicaid, gap-group, and uninsured populations
17 have significant socioeconomic pressures, which if addressed
18 will result in measurable improvement in preventable health care
19 costs; and
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21 WHEREAS, differences among population groups exist;
22 therefore, disaggregation of assessment data by race, age,
23 gender, socioeconomic status, education level, and geography is
24 vital to addressing social determinants of health; and
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26 WHEREAS, the Legislature adopted H.C.R. No. 146, H.D. 1,
27 during the Regular Session of 2013, establishing a social
28 determinants of health and risk adjustment working group; now,
29 therefore,
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31 BE IT RESOLVED by the Senate of the Twenty-eighth
32 Legislature of the State of Hawaii, Regular Session of 2015, the
33 House of Representatives concurring, that the President of the
34 Senate and Speaker of the House of Representatives are requested
35 to reestablish a working group to examine social determinants of
36 health and risk adjustment for Medicaid, gap-group, and
37 uninsured individuals; and
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39 BE IT FURTHER RESOLVED that the working group include but
40 not be limited to the following members:
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- (1) The Insurance Commissioner or the Commissioner's designee;
- (2) The Director of Human Services or the Director's designee;
- (3) Representatives from health insurance plans within the State to be invited by the Director of Health;
- (4) The President of the Healthcare Association of Hawaii or the President's designee;
- (5) The Chief Executive Officer of the Hawaii Primary Care Association or the Chief Executive Officer's designee;
- (6) The President of the Hawaii Medical Association or the President's designee;
- (7) The Director of Health or the Director's designee;
- (8) Three members from Hawaii's health care provider community to be invited by the Director of Health;
- (9) Three members from Hawaii's community health centers to be invited by the Director of Human Services;
- (10) One consumer who is enrolled in Medicaid, one consumer who falls into the gap-group, and one consumer who is uninsured;
- (11) The Executive Director of the Hawaii Health Connector or the Executive Director's designee;
- (12) The Coordinator of the Governor's Healthcare Transformation Office or the Coordinator's designee;
- (13) The chairs of the House and Senate Health and Human Services committees; and
- (14) The Administrator of the Office of Hawaiian Affairs or the Administrator's designee; and



1 BE IT FURTHER RESOLVED that the Healthcare Transformation
2 Office Coordinator, in partnership with the Legislature, is
3 requested to provide a facilitator for the working group; and
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5 BE IT FURTHER RESOLVED that the working group is requested,
6 at a minimum, to examine the following:
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- 8 (1) Enabling services and payment for these services;
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- 10 (2) Care coordination efforts, including which settings
11 offer care coordination, who employs care
12 coordinators, whether health plans pay for on-site or
13 off-site coordination, whether there are any
14 standardization of care coordination efforts with
15 hospitals, and the transition of care from hospital to
16 the community setting;
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- 18 (3) The structure of incentives provided by the State to
19 health plans and a determination of whether the
20 incentives align effectively with providers;
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- 22 (4) The effectiveness of health plan coordinated and
23 managed behavioral health services, substance abuse
24 treatment, and pain management;
25
- 26 (5) The management of risk pools and the collaboration and
27 shared information of these risk pools between plans
28 and providers;
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- 30 (6) Value-added services that are offered in health care
31 homes, including engaging community, cultural
32 proficiency, workforce and job training, and care-
33 enabling services, identifying the settings where
34 these services are offered, and identifying whether
35 the State incentivizes these services;
36
- 37 (7) The risk adjustment systems identifying medical
38 complexity and social determinants that need to be
39 improved or adopted to ensure patients receive
40 necessary care and that performance-based incentives
41 for providers are fair;
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1 (8) Risk adjustment between the State and health plans,
2 including high-risk patients with behavioral
3 conditions and the early onset of chronic disease,
4 particularly for Native Hawaiians and other high-risk
5 populations;
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7 (9) How other states are implementing comprehensive
8 approaches to Medicaid and health insurance exchange
9 risk-adjustment practices that incorporate medical and
10 social risk factors; and
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12 (10) The benefit package for gap-group and Medicaid
13 enrollees and an analysis of their needs, including
14 social determinants of health, enabling services, and
15 reimbursement rates from the State and health plans;
16 and
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18 BE IT FURTHER RESOLVED that the working group is requested
19 to submit a preliminary report of its findings and
20 recommendations, including any proposed legislation, to the
21 Legislature no later than twenty days prior to the convening of
22 the Regular Session of 2016, and a final report to the
23 Legislature no later than twenty days prior to the convening of
24 the Regular Session of 2017; and
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26 BE IT FURTHER RESOLVED that the working group be subject to
27 chapter 92, Hawaii Revised Statutes; and
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29 BE IT FURTHER RESOLVED that the working group cease to
30 exist on June 30, 2017; and
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32 BE IT FURTHER RESOLVED that certified copies of this
33 Concurrent Resolution be transmitted to the Governor, Director
34 of Human Services, Director of Health, Director of Commerce and
35 Consumer Affairs, Healthcare Transformation Coordinator,
36 Insurance Commissioner, Healthcare Association of Hawaii, Hawaii
37 Primary Care Association, Hawaii Medical Association, Executive
38 Director of the Hawaii Health Connector, and Administrator of
39 the Office of Hawaiian Affairs.

